

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
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(571) 273-2885

or Fax

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21921 7590 08/23/2005

DOV ROSENFELD
5507 COLLEGE AVE
SUITE 2
OAKLAND, CA 94618

10/06/2005 LWONDIM2 00000026 09801063

01 FC:1501	1400.00 OP
02 FC:1504	300.00 OP
03 FC:8001 APPLICATION NO.	FILING 0.00 OP

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO. CONFIRMATION NO.

09/801,063 03/07/2001 Thomas Klein BARCO-019-1 2204

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Amy Drury	(Depositor's name)
<i>W. Drury</i>	(Signature)
October 5, 2005	(Date)

TITLE OF INVENTION: METHOD AND APPARATUS FOR SEAMLESS IMAGING SLEEVES AS USED IN FLEXOGRAPHY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	11/23/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
ROGERS, SCOTT A	2626		358-001900		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Dov RosenfeldInventek3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Esko-Graphics A/S

Ballerup, Denmark

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
- Publication Fee (No small entity discount permitted)
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 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0292 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

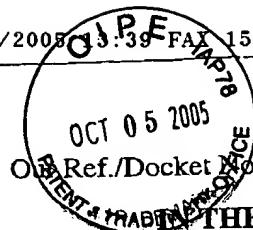
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature XDate October 5, 2005Typed or printed name Dov RosenfeldRegistration No. 38,687

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Ref./Docket No.: BARCO-019-1

Patent

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Klein, et al.

Application No.: 09/801,063

Filed: March 7, 2001

Title: METHOD AND APPARATUS FOR
SEAMLESS IMAGING OF SLEEVES AS
USED IN FLEXOGRAPHY

Group Art Unit: 2626

Examiner: Tia Carter

Notice of Allowance Mailed:
August, 23, 2005

Confirmation No: 2204

SUBMISSION OF ISSUE FEE

Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Commissioner:

Transmitted herewith is a completed "Issue Fee Transmittal" Form. Included with the form are:

A credit card payment form for the issue fee, publication fee and any advance order of copies;

The Commissioner is hereby authorized to charge payment of the any missing fee or credit any overpayment to Deposit Account No. 50-0292
 (A DUPLICATE OF THIS TRANSMITTAL IS ATTACHED):

Respectfully Submitted,

OCT. 5, 2005

Date

Dov Rosenfeld, Reg. No. 38687

Address for correspondence:

Dov Rosenfeld
 5507 College Avenue, Suite 2,
 Oakland, CA 94618
 Tel. 510-547-3378; Fax: 510-291-2985

Certificate of Facsimile Transmission under 37 CFR 1.8

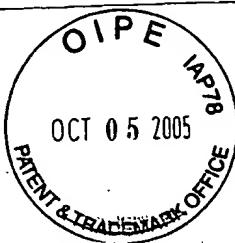
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Date: OCT. 5, 2005Signed: Amy Drury

Name: Amy Drury

INVENTEK

Dov Rosenfeld
5507 College Avenue, Suite 2
Oakland, CA 94618, USA
Phone: (510) 547-3378; Fax: (510) 291-2985
dov@inventek.com



Fax

OUR REF: BARCO-019-1

TO: Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

DATE: October 5, 2005

FROM: Dov Rosenfeld, Reg. No., 38,687

RE: Issue Fee for Application No.: 09/801,063

OFFICIAL COMMUNICATION

ISSUE FEE PAYMENT

Included herewith are:

- A transmittal letter and copy
- Fee(s) Transmittal (form PTOL-85)
- Credit Card charge form for issue fee

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Signed: Amy Drury
Name: Amy Drury